

MAIL/SHIPPING LABEL REQUEST

MAIL/SHIPPING AUTHORIZATION

QUANTITY: _____
(PIECES OF MAIL ETC.)

DIVISION: _____

UNIT/PROGRAM: _____

FUND - AGENCY - SID - FUNC - ACTIVITY

SPACE RESERVED FOR BARCODE LABEL

APPROVED: _____ DATE: _____

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APPROVED: _____ DATE: _____

AUTHORIZED SIGNATURE: _____ DATE: _____